

ISSUE SLIP STATE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J. L.		6/25/99
O.I.P.E. CLASSIFIER		51	6/26/99
FORMALITY REVIEW	[Signature]	88578	7/13/99

INDEX OF CLAIMS

..... Rejected N Non-elected
 Allowed I Interference
 (Through numeral)..... Canceled A Appeal
 Restricted O Objected

Claim	Date
1	3-11-02
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Claim	Date
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If more than 150 claims or 10 actions
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